Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 1 of 49

Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
NORTHERN DISTRICT OF ILLINOIS	_		
Case number (if known)	_ Chapter you are filing under:		
	☐ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	Chapter 13		Check if this an amended filing
		1	

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Laurance First name A Middle name Matthews Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7116	

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 2 of 49

Case number (if known)

Debtor 1 Laurance A Matthews

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		5336 S Hyde Park Blvd, Apt 103 Chicago, IL 60615 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
ò.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Entered 06/29/17 09:29:33 Page 3 of 49 Case 17-19575 Doc 1 Filed 06/29/17 Desc Main

Document Case number (if known) Debtor 1 Laurance A Matthews

7.	The chapter of the Bankruptcy Code you are choosing to file under				each, see <i>Notice Red</i> ge 1 and check the a			uals Filing for Bankruptcy
	choosing to file under	☐ Cha	apter 7					
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		■ Cha	apter 13					
В.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more de about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mo order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check a pre-printed address.						, cashier's check, or money
						this option, sig	gn and attach the Applica	ation for Individuals to Pay
			•	e in Installments (C t my fee he waive	•	this option only	if you are filing for Char	oter 7. By law, a judge may,
		t a	out is not requipplies to you	uired to, waive your ir family size and y	fee, and may do so ou are unable to pay	only if your inc	come is less than 150% of	of the official poverty line that this option, you must fill out
).	Have you filed for bankruptcy within the	□ No.						
	last 8 years?	Yes						
			District	ilnbke	When	1/14/15	Case number	15-01100
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
11.	Do you rent your residence?	■ No.	Go to li	ne 12.				
	residence:	☐ Yes	. Has yo	ur landlord obtaine	d an eviction judgme	nt against you	and do you want to stay	in your residence?
				No. Go to line 12.				

		Document	Page 4 01 49	
Debtor 1	Laurance A Matthews		3	Case number (if known)

art	3: Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busi	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code		
	it to this petition.		Check		x to describe your business:		
					ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can so deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chapt	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
art	4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	he hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code		

Debtor 1 Laurance A Matthews

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 6 of 49 Case number (if known) Debtor 1 Laurance A Matthews Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Signature of Debtor 1

 Executed on MM / DD / YYYY
 Executed on MM / DD / YYYY

| MM / DD / YYYY

Signature of Debtor 2

/s/ Laurance A Matthews

Laurance A Matthews

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 7 of 49

Debtor 1 Laurance A Matthews Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Thomas G. Stahulak Date June 29, 2017								
Signature of Attorney for Debtor MM / DD / YYYY								
Thomas G. Stahulak Printed name								
Stahulak & Associates, L.L.C.	/ GetFiled							
53 W. Jackson Blvd., Suite 65 Chicago, IL 60604	53 W. Jackson Blvd., Suite 652 Chicago II 60604							
Number, Street, City, State & ZIP Code								
Contact phone (312) 662-1480 Email address ecf@stahulakandassociates.com								
6288620								
Bar number & State	·							

		1200:111116	<u> </u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Laurance A Matthe	ews		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				Check if this is amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,025.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,025.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	5,313.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	185,787.00
	Your total liabilities	\$	191,100.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,142.15
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,827.15
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Laurance A Matthews

Document Page 9 of 49
Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,586.54

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$ _	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	174,733.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	174,733.00

				Document	Page 10 of 49		
Fill in t	his inforn	nation to identify	your case ar	nd this filing:			
Debtor	1	Laurance A N		Middle Name	Last Name		
Debtor (Spouse,		First Name		Middle Name	Last Name		
United	States Ba	nkruptcy Court for	the: NORT	HERN DISTRICT OF ILLII	NOIS		
Case n							Charle if their in an
Case II							☐ Check if this is an amended filing
Offic	ial Fo	rm 106A/E	3				
Sch	edul	e A/B: Pi	roperty	/			12/15
think it fi informat Answer (its best. Be ion. If more every ques	e as complete and e space is needed, tion.	accurate as po attach a separa	ssible. If two married people	an asset fits in more than one e are filing together, both are e top of any additional pages vn or Have an Interest In	e equally responsible for	supplying correct
				et in any residence, building,			
			juitable litteres	it in any residence, building	iana, or similar property:		
_	. Go to Part	t 2. s the property?					
	Ī						
Part 2:	Describe '	Your Vehicles					
someon	e else driv	es. If you lease a	vehicle, also		whether they are register executory Contracts and Un		vehicles you own that
□ No)						
■ Ye	es						
						D	
		Vissan		Who has an interest in th	e property? Check one	the amount of any secu	claims or exemptions. Put ured claims on Schedule D:
-		Versa S 2012		■ Debtor 1 only □ Debtor 2 only			laims Secured by Property.
	Approximate		55,000	Debtor 1 and Debtor 2 of	only	Current value of the entire property?	Current value of the portion you own?
	Other inform	nation:	1	At least one of the debt	ors and another		
				Check if this is comm (see instructions)	unity property	\$7,475.00	\$7,475.00
4. Wate	ercraft, air	craft, motor hom	nes, ATVs and	d other recreational vehi	cles, other vehicles, and	accessories	
Exan	nples: Boat	ts, trailers, motors	, personal wat	tercraft, fishing vessels, sr	nowmobiles, motorcycle acc	cessories	
■ No)						
□ Ye	es						
					om Part 2, including any		\$7,475.00
5	l						
		Your Personal and nave any legal or		ems erest in any of the follow	ving items?		Current value of the
, , , ,		,	7	, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	5		portion you own? Do not deduct secured claims or exemptions.
		ods and furnishi jor appliances, fur		china, kitchenware			, , , , , , , , , , , , , , , , , , ,

□ No

Official Form 106A/B Schedule A/B: Property

	Case 17-19575	Doc 1	Filed 06/29/17 Document	Page 11 of 49	
Debtor 1	Laurance A Matthews			Case number (if know	vn)
Yes.	Describe				
	Used pe	ersonal hou	sehold furniture and g	goods/items	\$1,000.00
7. Electro i Exampi ■ No				oment; computers, printers, scanners; mus	ic collections; electronic devices
☐ Yes.	Describe				
Example ■ No	ibles of value les: Antiques and figurines; p other collections, memo Describe			oks, pictures, or other art objects; stamp, c	oin, or baseball card collections;
Example No	nent for sports and hobbies les: Sports, photographic, ex musical instruments		other hobby equipment;	bicycles, pool tables, golf clubs, skis; cano	es and kayaks; carpentry tools;
■ No	ms ples: Pistols, rifles, shotguns Describe	, ammunitior	n, and related equipmen	t	
□ No	es ples: Everyday clothes, furs, Describe	leather coat	s, designer wear, shoes	, accessories	
	Used pe	rsonal clotl	ning and accessories		\$300.00
■ No □ Yes. 13. Non-fa Exam ■ No □ Yes. 14. Any ot	ples: Everyday jewelry, costu Describe arm animals ples: Dogs, cats, birds, horse Describe	es old items yo		ding rings, heirloom jewelry, watches, gem	
	the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$1,300.00
	escribe Your Financial Assets wn or have any legal or equ	uitable inter	act in any of the follow	ring?	Current value of the
DO you ov	wn or nave any legal or equ	uitable Inter	est III ally OF THE TOHOW	my:	portion you own? Do not deduct secured claims or exemptions.
□ No	ples: Money you have in you			osit box, and on hand when you file your po	etition
Official For	m 106A/B		Schedule A/B: F	Property	page 2

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 12 of 49 Case number (if known)

				Cash on hand	\$100.00
17.	institutions. If			nts; certificates of deposit; shares in credit unions, brokerage houses, and other vith the same institution, list each.	similar
	□ No ■ Yes			Institution name:	
		17.1.	Checking	Fidelity	\$89.00
		17.2.	Checking and Savings	Chicago Municipal Employees Credit Union	\$10.00
		17.3.	Savings	Ally	\$50.00
18.	■ No			erage firms, money market accounts	
19.	Non-publicly traded sto	ck and		ated and unincorporated businesses, including an interest in an LLC, partr	nership, and
	■ No □ Yes. Give specific info			 % of ownership:	
20.	Negotiable instruments in Non-negotiable instrume No	rate bor nclude p ents are	personal checks, cashi those you cannot trans	able and non-negotiable instruments ers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
	☐ Yes. Give specific infor		about them uer name:		
21.	Retirement or pension a Examples: Interests in IF □ No			3(b), thrift savings accounts, or other pension or profit-sharing plans	
	Yes. List each account		tely. of account:	Institution name:	
		401(k	κ)	through Employer - NO CASH SURRENDER VALUE	\$1.00
	Examples: Agreements v	deposit	ts you have made so th	hat you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications companies, or others	
	Yes		dia	Institution name or individual:	
∠3.	No	·	, ,	to you, either for life or for a number of years)	
. .			ne and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 52 ■ No	1 IRA, i i 29A(b),	n an account in a qua and 529(b)(1).	alified ABLE program, or under a qualified state tuition program.	
		titution r	name and description.	Separately file the records of any interests.11 U.S.C. § 521(c):	

		Case 17-195	75 Doc 1	Filed 06/29/17 Document	Entered 06/29/17 09:29:33 Page 13 of 49	Desc Main
De	ebtor 1	Laurance A Matth	ews		Case number (if known)	
25.	Trusts, ■ No	equitable or future i	nterests in prope	rty (other than anythin	g listed in line 1), and rights or powers exe	rcisable for your benefit
	☐ Yes.	Give specific informat	tion about them			
26.	Examp ■ No		ames, websites, p	ts, and other intellectu roceeds from royalties a	al property nd licensing agreements	
07						
27.	Examp	es, franchises, and o ples: Building permits,	exclusive licenses,	ngibles , cooperative association	n holdings, liquor licenses, professional license	es
	☐ Yes.	Give specific informat	tion about them			
M	oney or p	property owed to you	u?			Current value of the
						portion you own?Do not deduct secured claims or exemptions.
28.	_	unds owed to you				
	■ No	Give specific informati	ion about them inc	duding whether you alrea	ady filed the returns and the tax years	
		3.10 3 4 5 6 1 1 1 1 1 1 1 1 1 1	,	naamig milamat yaa amat	, ,	
29.	■ No			usal support, child suppo	ort, maintenance, divorce settlement, property	settlement
		•				
30.					efits, sick pay, vacation pay, workers' compen	sation, Social Security
	■ No					
	⊔ Yes.	Give specific informat	tion			
31.		ts in insurance polic ples: Health, disability,		nealth savings account (I	HSA); credit, homeowner's, or renter's insuran	ce
	_	Name the insurance c	ompany of each po	olicy and list its value.		
			Company name:		Beneficiary:	Surrender or refund value:
32.	If you a			someone who has die t proceeds from a life ins	d surance policy, or are currently entitled to rece	ive property because
	☐ Yes.	Give specific informat	tion			
33.					t or made a demand for payment	
	■ No	oles: Accidents, employ	yment disputes, ins	surance claims, or rights	to sue	
	☐ Yes.	Describe each claim				
34.	Other o	contingent and unlique	uidated claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim				
35.	Any fin	ancial assets you di	d not already list			
		Give specific informat	tion			

Official Form 106A/B Schedule A/B: Property page 4 Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 14 of 49

Deb	tor 1	Laurance A Matthews	Case number (if known)	
36.		he dollar value of all of your entries from Part 4, inclu art 4. Write that number here		\$250.00
Part	5: Des	scribe Any Business-Related Property You Own or Have an I	nterest In. List any real estate in Part 1.	
37. C	o you o	own or have any legal or equitable interest in any business-ro	elated property?	
	No. Go	to Part 6.		
	Yes. G	So to line 38.		
Part		scribe Any Farm- and Commercial Fishing-Related Property on own or have an interest in farmland, list it in Part 1.	You Own or Have an Interest In.	
16. I	Do you	own or have any legal or equitable interest in any fa	rm- or commercial fishing-related property?	
	No.	Go to Part 7.		
	☐ Yes.	Go to line 47.		
Part	7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above	
		have other property of any kind you did not already bles: Season tickets, country club membership	list?	
		Give specific information		
54.	Add t	he dollar value of all of your entries from Part 7. Write	e that number here	\$0.00
Part	8:	List the Totals of Each Part of this Form		
55.	Part 1	: Total real estate, line 2		\$0.00
56.	Part 2	t: Total vehicles, line 5	\$7,475.00	
57.	Part 3	: Total personal and household items, line 15	\$1,300.00	
58.	Part 4	: Total financial assets, line 36	\$250.00	
59.	Part 5	: Total business-related property, line 45	\$0.00	
60.	Part 6	3: Total farm- and fishing-related property, line 52	\$0.00	
61.	Part 7	: Total other property not listed, line 54	+ \$0.00	

\$9,025.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

62. Total personal property. Add lines 56 through 61...

\$9,025.00

\$9,025.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

		17(141111)	III I (IIII. I.) (II 4 .)	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Laurance A Matth	ews		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	ne Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2012 Nissan Versa S	,	\$7,475.00		\$2,162.00	735 ILCS 5/12-1001(c)
EINE HOM Genedale 24 B.	0.1			100% of fair market value, up to any applicable statutory limit	
Used personal housel goods/items	nold furniture and	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	6.1			100% of fair market value, up to any applicable statutory limit	
Used personal clothin Line from Schedule A/B:		\$300.00		\$300.00	735 ILCS 5/12-1001(a)
Elife from Concadio 742.				100% of fair market value, up to any applicable statutory limit	
Cash on hand Line from Schedule A/B:	16.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
EINE HOM OCHECUME PAB.	Zine nom constant 702. Tel.			100% of fair market value, up to any applicable statutory limit	
Checking: Fidelity	17 1	\$89.00		\$89.00	735 ILCS 5/12-1001(b)
Line nom <i>Gonedule A/D</i> .	Line from <i>Scriedule A/B</i> : 17.1			100% of fair market value, up to any applicable statutory limit	

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 16 of 49

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	cking and Savings: Chicago icipal Employees Credit Union	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
	from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	ngs: Ally from <i>Schedule A/B</i> : 17.3	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
LING	nom concean 70B. Tric			100% of fair market value, up to any applicable statutory limit	
	k): through Employer - NO CASH	\$1.00		\$1.00	735 ILCS 5/12-1006
	from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
(Sub	you claiming a homestead exemption ject to adjustment on 4/01/19 and every	3 years after that for ca	ises fil	ed on or after the date of adjustme	,
		ed by the exemption wi	thin 1	,215 days before y	ou filed this case

	17-19575		Page 17	06/29/17 09:3 of 49	29:33 Desc N	nam
Fill in this information	on to identify you	ur case:				
	aurance A Mat					
	irst Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	irst Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the	: NORTHERN DISTRICT OF ILLIN	IOIS			
Coco number						
Case number					☐ Check	if this is an
						ded filing
00000	005					
Official Form 1						
Schedule D:	Creditors	Who Have Claims S	ecured	by Propert	У	12/15
		If two married people are filing together out, number the entries, and attach it to				
number (if known).						
Do any creditors have		,, , ,				
☐ No. Check this	box and submit t	his form to the court with your other so	chedules. You	ı have nothing else t	o report on this form.	
Yes. Fill in all of	of the information	below.				
Part 1: List All Se	cured Claims					
		more than one secured claim, list the credit		Column A	Column B	Column C
		s a particular claim, list the other creditors in ical order according to the creditor's name.	n Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Nissan Motor	Acceptance	Describe the property that secures the	e claim:	\$5,313.00	\$7,475.00	\$0.00
Creditor's Name		2012 Nissan Versa S 55,000 mi	les			
Po Box 66036	0	As of the date you file, the claim is: Ch	eck all that			
Dallas, TX 752		apply. Contingent				
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mo	ortgage or secui	red		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the de	•	☐ Judgment lien from a lawsuit	ariio o iiori)			
☐ Check if this claim			urchase Mo	ney Security		
community debt		— Other (including a right to onset)		-,		
	Opened					
	01/12 Last					
	Active					
Date debt was incurred		Last 4 digits of account numbe	r 0001			
Date debt was incurred	0/14/17	Last 4 digits of account numbe		\$5,31		

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$5,313.00

Write that number here:

Debtor 1	
Debtor 2 (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITy claims and Part 2 for creditors with NONPRIORITy schedule G: Executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of an aname and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has m unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims after than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims listed intention of the creditor separately for each claim. If a creditor has m unsecured claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims list lease and list	
Debtor 2 (Spouse f, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ((if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORI any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property Schedule 6: Executory Contracts and Unexplired Leases (Official Form 106G). Do not include any creditors with partially secured Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number 4. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of an anne and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has m unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims after than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services Nonpriority Creditor's Name 1 Seriane Dr Joliet, IL 60435 Number Sireet City State Zip Code Who incurred the debt? Check one. Debtor 1 only Unliquidated	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORI any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secures Schedule B: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number eff. Attach the Continuation Page to this page. If you have no Information to report in a Part, do not file that Part. On the top of an annea and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. Do not list claims after than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Alm Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated	
Case number (if known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORI any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number 1. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of an aname and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims No. Go to Part 2:	
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORI any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property Schedule D: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured Schedule D: Creditors Who Have Claims Secured by Property If more space is needed, copy the Part you need, fill it out, number eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of an name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has munsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims after than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent Unliquidated	
Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORI any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property Schedule G: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any creditors with partially secured Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number eth. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of an ame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alter than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Contingent Unliquidated	☐ Check if this is an amended filing
any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of an annee and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already and one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Poebtor 1 only Contingent Unliquidated	12/15
1. Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. □ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ■ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims after than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 2 only	Official Form 106A/B) and on laims that are listed in he entries in the boxes on the
No. Go to Part 2.	
Yes.	
Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ■ Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alre than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services □ Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code When was the debt incurred? □ Debtor 1 only □ Debtor 2 only □ Unliquidated	
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alre than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated	
No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alre than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Contingent Unliquidated	
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has munsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alre than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only 4.2 Contingent Unliquidated	
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has me unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alre than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill Part 2. 4.1 Aim Psychological Services Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated	
unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims alre than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill Part 2. Aim Psychological Services	
Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated	dy included in Part 1. If more
Nonpriority Creditor's Name 13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated	Total claim
13 Fairlane Dr Joliet, IL 60435 Number Street City State Zlp Code When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated	\$207.00
Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only As of the date you file, the claim is: Check all that apply Contingent □ Unliquidated	
■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated	
□ Debtor 2 only □ Unliquidated	
·	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you d Is the claim subject to offset? report as priority claims	not
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify	

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 19 of 49

Debtor 1 Laurance A Matthews Case number (if know) 4.2 \$3,983.00 Avant Credit, Inc. Last 4 digits of account number 3011 Nonpriority Creditor's Name 640 N La Salle St Opened 04/16 Last Active Suite 535 When was the debt incurred? 12/09/16 Chicago, IL 60654 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other, Specify 4.3 Fed Loan Serv Last 4 digits of account number 0011 \$174,733.00 Nonpriority Creditor's Name Opened 11/15 Last Active Po Box 60610 When was the debt incurred? 5/31/17 Harrisburg, PA 17106 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational 4.4 Illinois Lending Corporation Last 4 digits of account number \$1,264.00 Nonpriority Creditor's Name 724 West Washington Blvd When was the debt incurred? 1st Floor Chicago, IL 60661 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify loan

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 20 of 49
Case number (if know)

Debioi	Laurance A Mattnews		Case number (if know)	
4.5	Mage & Price	Last 4 digits of account number	6001	\$741.00
	Nonpriority Creditor's Name 1110 W Lake Cooke Rd	When was the debt incurred?	Opened 4/04/16	
	Buffalo Grove, IL 60089			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	Пол		
		Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	At least one of the debtors and another	Student loans	a ciaiii.	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	mation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Laurie M Sc	humacher D D S	
4.6	Northwestern Hospital	Last 4 digits of account number		\$4,596.00
	Nonpriority Creditor's Name 251 E. Huron	When was the debt incurred?		
	Chicago, IL 60611			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

4.7	Nova Care Nonpriority Creditor's Name	Last 4 digits of account number		\$263.00
	400 Technology Dr Suite 240 Canonsburg, PA 15317	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes			
	••	— опол. орошу		
Part 3:	List Others to Be Notified About a Deb	ot That You Already Listed		
is tryi have ı	nis page only if you have others to be notified a ng to collect from you for a debt you owe to so more than one creditor for any of the debts that ed for any debts in Parts 1 or 2, do not fill out o	meone else, list the original creditor in t you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	•	On which entry in Part 1 or Part 2 did you	list the original creditor?	
Laurie	M Schumacher D D S	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clair	ns
212 W	Van Buren St, 6th Fl	-	Part 2: Creditors with Nonpriority Unsecured (Claims

Official Form 106 E/F

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 21_of 49

Debtor 1 Laurance A Matthews		Case number (if know)			
Chicago, IL 60607	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did y	<u> </u>			
Northwestern Medical Facility	Line <u>4.6</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
680 N Lake Shore Drive Ste 1118 Chicago, IL 60611		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Onloage, 12 00011	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
Northwestern Medicine	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
28155 Network Place Chicago, IL 60673		Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 did y	ou list the original creditor?			
Northwestern Memorial Hospital	Line <u>4.6</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
Po Box 73690 Chicago, IL 60673		Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 174,733.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 11,054.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 185,787.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Laurance A Matthe			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Mac Properties 1364 E 53rd Street Chicago, IL 60615	monthly apt lease

		Docume	ent Page 23 d	N 49	
Fill in this	information to identify your				
Debtor 1	Laurance A Matth	ews			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb (if known)	per				☐ Check if this is an
					amended filing
Official	l Form 106H				
	ule H: Your Cod	obtors			12/15
Scrieu	ule II. Toul Cou	CDLOI 3			12/15
fill it out, ar your name		boxes on the left. Attach . Answer every question	the Additional Page t	o this page. On the top of	led, copy the Additional Page, any Additional Pages, write
	, ou (you are ming a joint oace,	ao not not omnor opouco	as a soussion.	
■ No □ Yes					
	h in the last 8 years, have you a, California, Idaho, Louisiana				ates and territories include
	Go to line 3.				
⊔ Yes	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	f that person is a guaran	tor or cosigner. Make	sure you have listed the c	ith you. List the person shown reditor on Schedule D (Official ledule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor Check all schedules the	or to whom you owe the debt at apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
7	Number Street			_	
(City	State	ZIP Code		

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 24 of 49

Fill	in this information to identify your ca	ase:							
Del	btor 1 Laurance A N	Matthews							
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	T OF ILLINOIS						
(If kr	Case number (If known)				Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:				
	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome						12/1	5
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filir r spouse is not filing wi	ng jointly, and your sp th you, do not include	ouse infor	is liv matic	ing with you, inclu on about your spo	ıde inform use. If mo	nation about your ore space is needed,	۱.
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse			
	If you have more than one job,	Employment status	■ Employed			☐ Emplo	yed		
	attach a separate page with information about additional employers.	Linployment status	☐ Not employed			☐ Not er	mployed		
		Occupation	mail clerk						
	Include part-time, seasonal, or self-employed work.	Employer's name	Millercoors LLC						
	Occupation may include student or homemaker, if it applies.	Employer's address	3939 W Highland E Milwaukee, WI 532						
		How long employed the	nere? 3 yrs 3 mt	hs					
Pai	ct 2: Give Details About Mor	nthly Income							_
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	ort for	any l	line, write \$0 in the	space. Incl	lude your non-filing	
	ou or your non-filing spouse have mo e space, attach a separate sheet to		embine the information f	or all e	emplo	oyers for that perso	n on the lin	es below. If you need	
						For Debtor 1	For Deb non-filir	otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,343.54	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

3,343.54

N/A

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 25 of 49

Debt	tor 1	Laurance A Matthews	_	Cas	e number (if known)			
	Con	y line 4 here	4	Fo	or Debtor 1	non	Debtor 2 or a-filing spouse	
_	•		4.	Φ_	3,343.54	\$_	N/A	
5.		all payroll deductions:	5 -	Φ.	504.50	•		
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ \$	521.50	\$_ \$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	φ \$	167.18 0.00	-\$ -	N/A N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$ \$	0.00	\$ -	N/A	
	5e.	Insurance	5e.	\$	224.88	\$ -	N/A	
	5f.	Domestic support obligations	5f.	\$	368.33	\$_	N/A	
	5g.	Union dues	5g.	\$	0.00	\$_	N/A	
	5h.	Other deductions. Specify: parking	5h.+	\$		+ \$	N/A	
		transit		\$	54.17	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,444.39	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,899.15	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00	\$_ \$_ \$	N/A N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		\$_ \$	0.00	\$_ \$	N/A	
	8g.	Pension or retirement income	— 8g.	\$ \$	0.00	\$ -	N/A	
	- 3-	Estimated future tax refund(s),	-3-	* -	0.00	· —	1471	
	8h.	Other monthly income. Specify: averaged over 12 month	8h.+	\$	243.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	243.00	\$_	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,142.15 + \$_		N/A = \$ 2	2,142.15
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your right friends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not cify:	r depen		. ,	•	Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$2	2,142.15
13.	Do y	ou expect an increase or decrease within the year after you file this form	1?				Combine monthly	
	П	Yes, Explain:						

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 26 of 49

	in this informa	tion to identify y	211 2222			1		
		ation to identify yo	our case:					
Deb	tor 1	Laurance A N	/latthews			Cho	eck if this is: An amended filing	1
Deb	tor 2						A supplement sho	wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as o	f the following date:
Unite	ed States Bankı	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
Of	ficial Fo	rm 106J				-		
		J: Your	Exper	ises				12/1
Be a	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people and the contract in the contract is another sheet to this				or supplying correct
Part 1.	11: Desci	ribe Your House	hold					
1.	■ No. Go to	o line 2.	in a conar	ate household?				
	□ res. Doe		iii a sepai	ate nousenoiu:				
			st file Offic	ial Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2.	
2.	Do vou hav	e dependents?	□ No					
_	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			son		13	■ Yes
								□ No
								_ □ Yes □ No
								☐ Yes
								□ No
								☐ Yes
3.	expenses o	penses include of people other t d your depende	han $_{\square}$	No Yes				-
exp	imate your ex		our bankr	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the	value of suc	h assistance an	non-cash d have ind	government assistance i	f you know Your Income			
(Off	icial Form 10)6I.)					Your exp	penses
4.		or home owners		nses for your residence. I or lot.	nclude first mortgag	e 4.	\$	932.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	4b. Prope	erty, homeowner's	s, or renter	's insurance		4b.	· ·	15.00
				upkeep expenses		4c.	·	0.00
_		owner's associat				4d.		0.00
5.	Additional i	mortgage payme	ents tor vo	our residence , such as ho	me equity loans	5.	35	0.00

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 27 of 49

Debt	Laurance A Matthews	Case num	ber (if known)	
6.	Utilities:			
_	6a. Electricity, heat, natural gas	6a.	\$	200.00
	6b. Water, sewer, garbage collection	6b.		0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	220.00
	6d. Other. Specify:	6d.	· ·	
		ou.	·	0.00
	Food and housekeeping supplies		·	300.15
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	20.00
	Personal care products and services	10.	·	10.00
1.	Medical and dental expenses	11.	\$	50.00
	Transportation. Include gas, maintenance, bus or train fare.	40	Φ.	50.00
	Do not include car payments.	12.		50.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
4.	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	30.00
	15d. Other insurance. Specify:	15d.		0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
	Specify:	16.	\$	0.00
	Installment or lease payments:		*	0.00
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	· ·	
	· · · · · · · · · · · · · · · · · · ·	176. 17d.	·	0.00
	17d. Other. Specify:	17u.	Ф	0.00
	Your payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). Other payments you make to support others who do not live with you.		\$	0.00
		19.	Ψ	0.00
	Specify:		our Incomo	
	Other real property expenses not included in lines 4 or 5 or this form or on <i>Sche</i> ct 20a. Mortgages on other property	20a.		0.00
			·	
	20b. Real estate taxes	20b.	· ·	0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
1.	Other: Specify:	21.	+\$	0.00
	Calaulata waxa manthii awaana			
	Calculate your monthly expenses			4.05- :-
	22a. Add lines 4 through 21.		\$	1,827.15
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,827.15
				-
	Calculate your monthly net income.		•	0
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		2,142.15
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,827.15
	23c. Subtract your monthly expenses from your monthly income.	00-	•	315.00
	The result is your monthly net income.	23c.	\$	313.00
	December 1981 of 1981			
	Do you expect an increase or decrease in your expenses within the year after you for example, do you expect to finish paying for your explanations within the year or do you expect your			or docrosco bossuss of a
	For example, do you expect to finish paying for your car loan within the year or do you expect your I modification to the terms of your mortgage?	mortgage	payment to increase	or decrease because of a
	, , , , , , , , , , , , , , , , , , , ,			
	■ No.			
	☐ Yes. Explain here:			

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 28 of 49

Fill in this info	rmation to identify your	case:			
Debtor 1	Laurance A Matthe	ews			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
00000	400D				
Official For					
Declara	tion About a	ın Individua	I Debtor's Sc	hedules	12/15
If two married p	people are filing together	r, both are equally resp	onsible for supplying cor	rect information.	
V		1 - 1 1 1 - 1 - 1 - 1 - 1 - 1		Maldon a falso atatama	
					nt, concealing property, or or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1		in aptoy base ban result i	π πιοσ αρ το φ2ου,σου, σ	imprisonment for up to 20
Sig	gn Below				
Did you n	ay or agree to hay some	one who is NOT an atto	orney to help you fill out b	ankruntov forms?	
Dia you p	ay or agree to pay some	one who is ito i an alle	mey to help you mi out b	ankiupicy forms:	
■ No					
☐ Yes.	Name of person			Attach Bankrup	tcy Petition Preparer's Notice,
_	•			Declaration, and	d Signature (Official Form 119)
Under nen	alty of periury I declare	that I have read the sur	nmary and schedules file	d with this declaration a	nd
•	re true and correct.	that i have read the sun	illiary and solicatios inc	a with this acolaration a	nu .
V / / I	A B.4l		V		
	urance A Matthews		X Signature of	Dobtor 2	
	nce A Matthews ure of Debtor 1		Signature of	Deniol 2	
Oignati	are or Debtor 1				
Date	June 29, 2017		Date		

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 29 of 49

		mation to identify you				
Deb	otor 1	Laurance A Matth	News Middle Name	Last Name		
Deb	otor 2					
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas	e number					
(if kn	own)				_	Check if this is an
						mended filing
○ t	Calal Ea	was 407				
	ficial Fo		Affaina fan Indiini	luala Filiaa faa B		
			Affairs for Individ			4/16
					equally responsible for sup y additional pages, write you	
		n). Answer every que			, aaamena pagee, mae je	
Par	Give I	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	_					
	■ Married■ Not mail					
	- NOLIIIA	med				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	<i>I</i> .	
	Debtor 1 Pr	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
	2201 E 70		From-To: 5/13-5/16	☐ Same as Debtor	1	☐ Same as Debtor 1
	Chicago, II	L 60649	3/13-3/10			From-To:
3. state	es and territor	<i>i</i> es include Arizona, Ca		vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
Par	Expla	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	_	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$21,882.66	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Case 17-19575

Page 30 of 49 Case number (if known) Document Debtor 1 Laurance A Matthews

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$36,164.00	☐ Wages, commissi bonuses, tips	ions,
	☐ Operating a business		☐ Operating a busin	iess
For the calendar year before that: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$34,714.00	☐ Wages, commissi bonuses, tips	ions,
	☐ Operating a business		☐ Operating a busin	iess
Include income regardless of whet and other public benefit payments; winnings. If you are filing a joint ca List each source and the gross inc No Yes. Fill in the details.	pensions; rental income; inter se and you have income that y	rest; dividends; money collect you received together, list it of	ed from lawsuits; royal nly once under Debtor	ties; and gambling and lottery
	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)	Pensions/ Annuities	\$309.00		
For the calendar year before that: (January 1 to December 31, 2015)	Pensions/ Annuities	\$404.00		
Part 3: List Certain Payments You	u Made Before You Filed for Ⅰ	Rankruntov		
List Certain Layments 100	a made before Tod I fled for t	Банктирісу		
	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	ımer debts. Consumer debts	are defined in 11 U.S.	C. § 101(8) as "incurred by an
During the 90 days bef	ore you filed for bankruptcy, di	d you pay any creditor a total	of \$6,425* or more?	
☐ Yes List below paid that c not include	each creditor to whom you pai reditor. Do not include paymen payments to an attorney for the on 4/01/19 and every 3 years	nts for domestic support obligations bankruptcy case.	ations, such as child su	upport and alimony. Also, do
Yes. Debtor 1 or Debtor 2	or both have primarily consu ore you filed for bankruptcy, di	ımer debts.		
■ No. Go to line	7.			
☐ Yes List below include pay	each creditor to whom you pai yments for domestic support ol or this bankruptcy case.			
Creditor's Name and Address	Dates of payme	nt Total amount	Amount you Wa	s this payment for

Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Case 17-19575

Page 31 of 49
Case number (if known) Document Debtor 1 Laurance A Matthews

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	No							
	Yes. List all payments to an insider.				_			
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost	,, ,	ments or transfer a	any property on a	ccount of a d	ebt that benefited an		
	■ No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name		
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case		
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?		
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened						
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		uding a bank or fir	nancial institution	n, set off any a	amounts from your		
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount		
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		rty in the possess	ion of an assigne	e for the ben	efit of creditors, a		
Pai	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankrup No	otcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?		
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value		
	Person to Whom You Gave the Gift and Address:							

Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Case 17-19575

Page 32 of 49
Case number (if known) Document Debtor 1 Laurance A Matthews

14.	Within 2 years before you filed for band ■ No □ Yes. Fill in the details for each gift or			ns with a total	I value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	on. Describe what you contributed		Dates you contributed	Value
Pai	t 6: List Certain Losses					
15.	Within 1 year before you filed for banks or gambling?	uptcy or	since you filed for bankruptcy, did y	you lose anytl	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lotte amount that insurance has paid. I	List pending	Date of your loss	Value of property lost
		insuran	ce claims on line 33 of Schedule A/B:	Property.		
Pai	t 7: List Certain Payments or Transfe	rs				
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition	r preparin	g a bankruptcy petition?			rty to anyone you
	□ No					
	Yes. Fill in the details.				Date payment	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any prop transferred			Amount of payment
	STAHULAK & ASSOCIATES, L.L.C 53 W. Jackson Blvd., Suite 652 Chicago, IL 60604		\$350.00 (\$310 filing fee + \$33 cr report + \$7 copy)	6/26/17 \$350		
	Green Path Debt Solutions 38505 Country Club Drive Farmington, MI 48331		\$25 credit counseling		6/27/17	\$25.00
17.	Within 1 year before you filed for banks promised to help you deal with your cr Do not include any payment or transfer th	editors or	to make payments to your creditor		r transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second with the se	our busine ers made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details. Person Who Received Transfer		Description and value of	Describe	any property or	Date transfer was
	Address Person's relationship to you		property transferred		received or debts	made
	i Gradii a relationaliip to you					

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Page 33 of 49 Case number (if known) Document

Debtor 1 Laurance A Matthews

19.		hin 10 years before you filed for bankrup eficiary? (These are often called asset-pro No		y property to a	ı self-settle	d trust or similar device	∍ of w	vhich you are a
		Yes. Fill in the details.						
	Name of trust		Description and v	Description and value of the property transferred				ate Transfer was
Par	t 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposit	t Boxes, and St	torage Unit	ts		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
		No						
		Yes. Fill in the details.						
		me of Financial Institution and dress (Number, Street, City, State and ZIP le)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	ı	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
		No						
		Yes. Fill in the details.						
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents		Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No							
		Yes. Fill in the details.						
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents		Do you still have it?
Par	t 9:	Identify Property You Hold or Control	,					
23.	Do	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust						
	for .	someone. No Yes. Fill in the details.						
	Ow	vner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Par	t 10:	Give Details About Environmental Info	ormation					
or	the p	ourpose of Part 10, the following definition	ons apply:					
	Env	vironmental law means any federal, state	, or local statute or regu	ulation concern	ning polluti	ion, contamination, rele	ases	of hazardous or

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Page 34 of 49 Case number (if known) Document

Debtor 1 Laurance A Matthews

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of a	ny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admi	nistrative proceeding under any enviro	onmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Co	onnections to Any Business						
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	of the following connections to any	y business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

Entered 06/29/17 09:29:33 Desc Main Case 17-19575 Filed 06/29/17 Doc 1 Document

Page 35 of 49 Case number (if known) Debtor 1 Laurance A Matthews

Part 12: Sign Below		
are true and correct. I understand that m	nt of Financial Affairs and any attachments, and I do aking a false statement, concealing property, or ob s up to \$250,000, or imprisonment for up to 20 year	taining money or property by fraud in connection
/s/ Laurance A Matthews		
Laurance A Matthews	Signature of Debtor 2	
Signature of Debtor 1		
Date June 29, 2017	Date	
Did you attach additional pages to Your	Statement of Financial Affairs for Individuals Filing	for Bankruptcy (Official Form 107)?
■ No		
Yes		
Did you pay or agree to pay someone wh	o is not an attorney to help you fill out bankruptcy	forms?
■ No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

connection

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Debtor's attorney received \$350.00 from Debtor(s) prior to filing of the case as an advanced payment in compensation of (1) analysis of financial situation; (2) consultation on various bankruptcy and non-bankruptcy options; (3) preparation of documents; (4) payment of filing fees; and, when applicable (5) payment of costs of credit report fees.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$0.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: June 29, 2017	C	11	3	
Signed:				
/s/ Laurance A Matthews			/s/ Thomas G. Stahulak	
Laurance A Matthews			Thomas G. Stahulak 6288620	
			Attorney for the Debtor(s)	
Debtor(s)				
Do not sign this agreement if th	e amounts	are bla	nk.	

Local Bankruptcy Form 23c

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 46 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

For legal services, I have agreed to accept	, I certify that I am the attorney of the petition in bankruptcy, or or in connection with the bankru	for the above nam agreed to be paid	ned debtor(s) and that	
rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) mpensation paid to me within one year before the filing or rendered on behalf of the debtor(s) in contemplation of of For legal services, I have agreed to accept	, I certify that I am the attorney of the petition in bankruptcy, or or in connection with the bankru	for the above nam agreed to be paid	ned debtor(s) and that	
mpensation paid to me within one year before the filing of rendered on behalf of the debtor(s) in contemplation of of For legal services, I have agreed to accept	of the petition in bankruptcy, or or in connection with the bankru	agreed to be paid		
		picy case is as for		
Prior to the filing of this statement I have received		\$	4,000.00	
		\$	0.00	
Balance Due		\$	4,000.00	
310.00 of the filing fee has been paid.				
e source of the compensation paid to me was:				
■ Debtor □ Other (specify):				
se source of compensation to be paid to me is:				
■ Debtor □ Other (specify):				
I have not agreed to share the above-disclosed compen-	sation with any other person unl	ess they are mem	bers and associates of my law firm.	
In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
Preparation and filing of any petition, schedules, statem Representation of the debtor at the meeting of creditors [Other provisions as needed] Negotiations with secured creditors to reduce	ent of affairs and plan which ma and confirmation hearing, and a to market value; exemption	ay be required; any adjourned hear planning; prepar	rings thereof; ation and filing of reaffirmation	
agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any discharg adversary proceeding.	oes not include the following ser geability actions, judicial lien a	rvice: avoidances, relie	of from stay actions or any other	
	CERTIFICATION			
	greement or arrangement for page	yment to me for re	epresentation of the debtor(s) in	
e 29, 2017	/s/ Thomas G. Stahul	ak		
<u> </u>	Thomas G. Stahulak			
		s I I C / GetFi	led	
	Chicago, IL 60604	(- (-)		
	` ,	, ,	3	
		ociales.com		
n y	Prior to the filing of this statement I have received Balance Due 310.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name: The return for the above-disclosed fee, I have agreed to rend Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors [Other provisions as needed] Negotiations with secured creditors to reduce agreements and applications as needed; preparation on household goods. The graph of the debtor of the debtors in any discharge adversary proceeding.	For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due 310.00 of the filing fee has been paid. the source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unled the agreement, together with a list of the names of the people sharing in the context of the agreement, together with a list of the names of the people sharing in the context of the agreement, together with a list of the names of the people sharing in the context of the debtor's financial situation, and rendering advice to the debtor in determinent of the above-disclosed fee, I have agreed to render legal service for all aspects of a return for the above-disclosed fee, I have agreed to render legal service for all aspects of a return for the above-disclosed fee, I have agreed to render legal service for all aspects of a return for the above-disclosed fee, I have agreed to render legal service for all aspects of a return for the above-disclosed fee, I have agreed to render legal service for all aspects of a return for the debtor's financial situation, and rendering advice to the debtor in determinent of the debtor at the meeting of creditors and confirmation hearing, and a government of the debtor at the meeting of creditors and confirmation hearing, and a greements and applications as needed; preparation and filing of motions of liens on household goods. The service of the debtor's in any dischargeability actions, judicial lien and adversary proceeding. The service of the debtor's file of the debtor's and confirmation hearing, and a service for the debtor's file of the debtor's file	rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as fol For legal services, I have agreed to accept \$ Prior to the filing of this statement I have received \$ Balance Due \$ 310.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): Thave not agreed to share the above-disclosed compensation with any other person unless they are memion or the agreement, together with a list of the names of the people sharing in the compensation is attained the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy of the debtor's financial situation, and rendering advice to the debtor in determining whether to Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hea [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; prepar agreements and applications as needed; preparation and filing of motions pursuant to 11 to 11 lens on household goods. The security that the foregoing is a complete statement of any agreement or arrangement for payment to me for no horsely proceeding. CERTIFICATION Thomas G. Stahulak Thomas G. Stahulak & Associates, L.L.C. / GetFi 53 W. Jackson Blvd., Suite 662	

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 47 of 49

United States Bankruptcy Court Northern District of Illinois

In re	Laurance A Matthews		Case No.		
		Debtor(s)	Chapter 13		
	VER	IFICATION OF CREDITOR MA	ATRIX		
	Number of Creditors:				
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	June 29, 2017	/s/ Laurance A Matthews Laurance A Matthews Signature of Debtor			

Aim Psychological Services 13 Fairlane Dr Joliet, IL 60435

Avant Credit, Inc 640 N La Salle St Suite 535 Chicago, IL 60654

Fed Loan Serv Po Box 60610 Harrisburg, PA 17106

Illinois Lending Corporation 724 West Washington Blvd 1st Floor Chicago, IL 60661

Laurie M Schumacher D D S 212 W Van Buren St, 6th Fl Chicago, IL 60607

Mage & Price 1110 W Lake Cooke Rd Buffalo Grove, IL 60089

Nissan Motor Acceptance Po Box 660360 Dallas, TX 75266

Northwestern Hospital 251 E. Huron Chicago, IL 60611

Northwestern Medical Facility 680 N Lake Shore Drive Ste 1118 Chicago, IL 60611

Northwestern Medicine 28155 Network Place Chicago, IL 60673

Case 17-19575 Doc 1 Filed 06/29/17 Entered 06/29/17 09:29:33 Desc Main Document Page 49 of 49

Northwestern Memorial Hospital Po Box 73690 Chicago, IL 60673

Nova Care 400 Technology Dr Suite 240 Canonsburg, PA 15317